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Atty Dkt.: 1579-1047
Your Ref.: _____ Date: August 5, 2009
To: Examiner Fronda - TC/A.U. 1652
Firm: USPTO
Facsimile No.: (571) 273-8300
From: Mary J. Wilson

Number of Pages (including cover sheet): 15
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Tabitha A. Trice
FACSIMILE OPERATOR

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper and any noted attachments are being transmitted by facsimile to the Patent and Trademark Office on August 5, 2009.

Mary J. Wilson
Mary J. Wilson

ATTACHMENT/S: Amendment and Credit Card Payment Form

MESSAGE:

In re Patent Application of:

Counter et al
Serial No. 10/554,295
Filed: August 15, 2006
For: TELOMERE ELONGATION

CONFIDENTIALITY NOTE

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In re Patent Application of

Atty MJW-01579-1047

Dkt.

C# M#

COUNTER et al

TC/A.U. 1652

Serial No. 10/554,295

Examiner: Fronda, C.L.

Filed: August 15, 2006

Date: August 5, 2009

Title: TELOMERE ELONGATION

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

☐ **Correspondence Address Indication Form Attached.****Fees are attached as calculated below:**

Total effective claims after amendment	0	minus highest number			
previously paid for	20	(at least 20) =	0 x \$52.00	\$0.00 (1202)/\$0.00 (2202)	\$ 0.00
Independent claims after amendment	0	minus highest number			
previously paid for	3	(at least 3) =	0 x \$220.00	\$0.00 (1201)/\$0.00 (2201)	\$ 0.00

If proper multiple dependent claims now added for first time, (ignore improper); add
\$390.00 (1203)/\$195.00 (2203) \$ 0.00

Petition is hereby made to extend the current due date so as to cover the filing date of this
paper and attachment(s)

One Month Extension	\$130.00 (1251)/\$65.00 (2251)	
Two Month Extensions	\$490.00 (1252)/\$245.00 (2252)	
Three Month Extensions	\$1110.00 (1253)/\$555.00 (2253)	
Four Month Extensions	\$1730.00 (1254)/\$865.00 (2254)	
Five Month Extensions	\$2350.00 (1255)/\$1175.00 (2255)	\$ 555.00
	\$140.00 (1814)/\$70.00 (2814)	\$ 0.00

Terminal disclaimer enclosed, add

☒ Applicant claims "small entity" status. ☐ Statement filed herewith

Rule 56 Information Disclosure Statement Filing Fee \$180.00 (1806) \$ 0.00

Assignment Recording Fee \$40.00 (8021) \$ 0.00

Other: \$ 0.00

TOTAL FEE \$ 555.00☒ **CREDIT CARD PAYMENT FORM ATTACHED.**

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.

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NIXON & VANDERHYE P.C.
By Atty: Mary J. Wilson, Reg. No. 32,955

Signature: Mary J. Wilson